TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission

Application Number	10/517,864
Filing Date	9/8/2005
First Named Inventor	Manfred Ratzsch
Art Unit	1796
Examiner Name	Liam J. Heincer
Attorney Docket Number	4385 - 045796

ENCLOSURES   *(Check all that apply)*

- [✓] Fee Transmittal Form
  - [✓] Fee Attached
- [✓] Amendment/Reply
  - [ ] After Final
  - [ ] Affidavits/declaration(s)
- [✓] Extension of Time Request
- [ ] Express Abandonment Request
- [ ] Information Disclosure Statement
- [ ] Certified Copy of Priority Document(s)
- [ ] Reply to Missing Parts/ Incomplete Application
  - [ ] Reply to Missing Parts under 37 CFR 1.52 or 1.53

- [ ] Drawing(s)
- [ ] Licensing-related Papers
- [ ] Petition
- [ ] Petition to Convert to a Provisional Application
- [ ] Power of Attorney, Revocation Change of Correspondence Address
- [ ] Terminal Disclaimer
- [ ] Request for Refund
- [ ] CD, Number of CD(s) _____
  - [ ] Landscape Table on CD

- [ ] After Allowance Communication to TC
- [ ] Appeal Communication to Board of Appeals and Interferences
- [ ] Appeal Communication to TC **(Appeal Notice, Brief, Reply Brief)**
- [ ] Proprietary Information
- [ ] Status Letter
- [ ] Other Enclosure(s) (please Identify below):

Remarks

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	The Webb Law Firm		
Signature	*[signature]*		
Printed name	Ann M. Cannoni		
Date	January 22, 2008	Reg. No.	35, 972

CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being electronically transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:
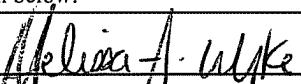
Signature	*[signature]*		
Typed or printed name	Melissa A. Wyke	Date	January 22, 2008

Doc. No.

<table>
<tr><td colspan="2"><i>Effective on 12/08/2004.</i>
<i>Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).</i></td><td colspan="2"><i>Complete if Known</i></td></tr>
<tr><td colspan="2" rowspan="2"><h1>FEE TRANSMITTAL
For FY 2008</h1></td><td>Application Number</td><td>10/517,864</td></tr>
<tr><td>Filing Date</td><td>9/8/2005</td></tr>
<tr><td colspan="2" rowspan="2">✓ Applicant claims small entity status. See 37 CFR 1.27</td><td>First Named Inventor</td><td>Manfred Ratzsch</td></tr>
<tr><td>Examiner Name</td><td>Liam J. Heincer</td></tr>
<tr><td colspan="2" rowspan="2">TOTAL AMOUNT OF PAYMENT</td><td>Art Unit</td><td>1796</td></tr>
<tr><td>Attorney Docket</td><td>4385 - 045796</td></tr>
</table>

($) 230.00

METHOD OF PAYMENT (check all that apply)

☐ Check ✓ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): _____

✓ Deposit Account Deposit Account Number: 23-0650   Deposit Account Name: The Webb Law Firm

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☐ Charge fee(s) indicated below   ☐ Charge fee(s) indicated below, **except for the filing fee**

✓ Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17   ✓ Credit any overpayments

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

FEE CALCULATION (All the fees below are due upon filing or may be subject to a surcharge.)

1. BASIC FILING, SEARCH, AND EXAMINATION FEES

	FILING FEES		SEARCH FEES		EXAMINATION FEES		
		Small Entity		Small Entity		Small Entity	
Application Type	**Fee ($)**	**Fee ($)**	**Fee ($)**	**Fee ($)**	**Fee ($)**	**Fee ($)**	**Fees Paid ($)**
Utility	310	75	510	255	210	105	_____
Design	210	105	100	50	130	65	_____
Plant	210	105	310	155	160	80	_____
Reissue	310	155	510	255	620	310	_____
Provisional	210	105	0	0	0	0	_____

2. EXCESS CLAIM FEES

Fee Description	Fee ($)	Small Entity Fee ($)
Each claim over 20 (including Reissues)	50	25
Each independent claim over 3 (including Reissues)	210	105
Multiple dependent claims	370	185

Total Claims	- 20 or HP	Extra Claims		Fee ($)		Fee Paid ($)
23	- 44	= _____	x	_____	=	_____

HP = highest number of total claims paid for, if greater than 20.

Multiple Dependent Claims

Fee ($)	Fee Paid ($)
_____	_____

Indep. Claims	- 3 or HP	Extra Claims		Fee ($)		Fee Paid ($)
3	- 3	= _____	x	_____	=	_____

HP = highest number of independent claims paid for, if greater than 3.

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is $260 ($130 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee ($)		Fee Paid ($)
_____ - 100 =	_____ / 50 =	_____ (round up to a whole number)	x _____	=	_____

4. OTHER FEE(S)   Fees Paid ($)

Non-English Specification, $130 fee (no small entity discount)   _____

Other (e.g., late filing surcharge): Two-Month Petition of Time Fee $230.00

SUBMITTED BY
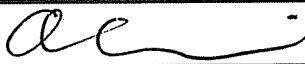
Signature	_[signature]_	Registration No. (Attorney/Agent) 35,972	Telephone 412-471-8815
Name (Print/Type)	Ann M. Cannoni		Date January 22, 2008